

STATE OF CALIFORNIA
TRAVEL EXPENSE CLAIM

See Instructions and *Privacy

Statement On Reverse Side

3-39

ELECTRONIC STD. 262 (REV. 04/95)

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CLAIMANT'S NAME Matthew R. Bettenhausen			SSAN OR EMPLOYEE NUMBER*			DEPARTMENT California Emergency Management Ac		
POSITION Secretary		CB/D NUMBER E99	DIVISION OR BUREAU Executive			INDEX NUMBER		
RESIDENCE* 2908 Weald Way, #312			HEADQUARTERS ADDRESS 3650 Schriever Ave.			TELEPHONE NUMBER 916-324-8908		
CITY Sacramento		STATE CA	ZIP CODE 95833	CITY Mather		STATE CA	ZIP CODE 95655	

(1) MONTH/YEAR March 2009	(2) DATE	TIME	(3) LOCATION WHERE EXPENSES WERE INCURRED	(4) LODGING	(5) MEALS			(6) INCIDENTALS	(7) TRANSPORTATION				(8) BUSINESS EXPENSE	(9) TOTAL EXPENSE FOR DAY
					BREAK-FAST	LUNCH	O.T., L.T. M.C. RELO. OR DINNER		(A) COST OF TRANS.	(B) TYPE USED	(C) CAREFARE TOLLS PARKING	(D) PRIVATE CAR USE		
										MILES	AMOUNT			
5-Mar	6:15		Sacramento to DC	\$ 151.53	✓	\$ 10.00	✓	\$ 18.00	✓		PC A			\$ 179.53
6-Mar			DC	\$ 151.53	✓			\$ 6.00	✓					\$ 157.53
7-Mar			DC	\$ 151.53	✓	\$ 6.00	✓	\$ 10.00	✓	\$ 18.00	✓	\$ 6.00	✓	\$ 191.53
8-Mar			DC	\$ 151.53	✓			\$ 6.00	✓					\$ 157.53
9-Mar			DC	\$ 151.53	✓			\$ 6.00	✓					\$ 157.53
10-Mar	20:00		DC to Sacramento			\$ 6.00	✓	\$ 10.00	✓	\$ 18.00	✓	\$ 6.00	✓	\$ 190.00
(10) SUBTOTALS				\$ 757.65	\$ 12.00	\$ 30.00	\$ 54.00	\$ 30.00		\$ 150.00				\$ 1,033.65

09 JUL - 1 AM 10:13
ACCOUNTING SERVICES

CLAIM TOTAL \$ 1,033.65

(11) PURPOSE OF TRIP, REMARKS AND DETAILS (Attached receipts/voucher when required)

3/5-10: Attend NEMA conference. Due to Sunday travel, unable to get to airport in time to park in economy.

(12) NORMAL WORK HOURS
9:00 - 6:00

(13) PRIVATE VEHICLE LICENSE NUMBER
BAP

(14) MILEAGE RATE CLAIMED
48.5¢/Mile

AGENCY ACCOUNTING OFFICE
USE ONLY

PAID BY REVOLVING FUND CHECK NUMBER

(15) I HEREBY CERTIFY That the above is a true statement of the travel expenses incurred by me in accordance with DPA rules in the service of the State of California.

DATE *July 1 2009*

SIGNATURE